



Commonwealth of Massachusetts
Executive Office of Health and Human Services
Division of Medical Assistance
www.mass.gov/dma

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This is an important message about your MassHealth benefits.

New Rules about Copayments

The copayment rules for MassHealth members are changing as of **February 1, 2004**. Even with these changes, MassHealth members will pay less in copayments for health care than most other health plans.

There are two types of MassHealth copayments: *pharmacy copayments* and *non-pharmacy copayments*.

As of February 1, 2004, the MassHealth copayments for **pharmacy services** will be:

- \$1 for **generic drugs** and **over-the-counter drugs** covered under MassHealth, for both first-time prescriptions and refills; and
- \$3 for **brand-name drugs** covered under MassHealth, for both first-time prescriptions and refills.

As of February 1, 2004, the MassHealth copayments for **non-pharmacy services** will be:

- \$3 when you use an **emergency department when it is not an emergency** (this is not a new requirement); and
- \$3 for **acute inpatient hospital stays**.

If you are unable to pay a copayment at the time of service, your provider still must fill your prescription and provide treatment. However, your provider can bill you later for the copayment. You should not go without necessary medications because you cannot afford the copayment now.

You will not have to pay a MassHealth copayment for any service covered by MassHealth **if**:

- you are under 19 years old;
- you are pregnant;
- your pregnancy ended within 60 days of the service;
- you are getting benefits under MassHealth Limited (emergency MassHealth);
- you are getting a Medicare-covered drug at a pharmacy that is a certified provider for Medicare and you are getting benefits under MassHealth Senior Buy-In (MassHealth and Medicare) or under MassHealth Standard;
- you are an inpatient in a nursing facility, chronic-disease or rehabilitation hospital, or intermediate-care facility for the mentally retarded, or are admitted to a hospital from such a facility;
- you are getting EAEDC (Emergency Aid to the Elderly, Disabled and Children) Program services, and are not covered under MassHealth Basic, Essential, or Standard; or
- you are getting hospice care.

You also do not have to pay a MassHealth copayment for:

- pharmacy services while you are an inpatient in a hospital or an intermediate care facility for the mentally retarded (However, you may still have to pay a non-pharmacy copayment.);
- hospital services (non-pharmacy copayment) when you have other comprehensive medical insurance, including Medicare (However, you may still have to pay a pharmacy copayment.);
- family-planning services;
- mental health or substance abuse-related services provided by a hospital; or
- emergency services.

If your health-care provider charges a copayment and you do not think you have to pay, be sure to tell your provider.

Cap on Copayment Amount

There is a cap on the amount of copayments each MassHealth member is liable for in a calendar year (January through December). The cap is the total amount of the copayments you have been charged, whether or not you have actually paid the copayment.

The MassHealth cap for **pharmacy copayments** for a full year is \$200. The MassHealth cap for **non-pharmacy copayments** for a full year is \$36. Since the new rules go into effect February 1, 2004, we have adjusted the cap for the calendar year 2004. The MassHealth cap for pharmacy copayments in 2004 is \$184. The MassHealth cap for non-pharmacy copayments in 2004 is \$33.

Each member of your family will be charged for copayments until he or she reaches each cap. For example, if you have met your pharmacy cap by September, you will not have to make pharmacy copayments until January 1 of the next year, but you will still be responsible for non-pharmacy MassHealth copayments until you have met that cap.

Notice of Meeting Caps

If you meet either MassHealth copayment cap, we will send you a letter stating that you do not have to pay copayments for the rest of the calendar year. You should keep these letters and show them to your providers if they say that you must pay a copayment.

Keeping Track of Copayments

It's a good idea to keep track of your copayments for the calendar year. If you think you have met your cap and the provider says you owe a copayment, you can let us know.

Your provider will give you a receipt when you pay a copayment. If you do not get a receipt from your provider, make sure to ask for one. If you are unable to pay the copayment, the pharmacist or hospital may give you a bill. The receipts and bills should show the name of the provider, type of service, date of service, your name, and the amount you paid or are responsible to pay.

Make sure to track your pharmacy copayment receipts and bills separately from your non-pharmacy copayment receipts and bills. You only need to send us copies of your original bills and receipts if you have met your cap but have not received a letter from us telling you that you have met your cap. If this happens, send copies of the original receipts and bills to the address listed below, along with your social security number or MassHealth ID number.

Division of Medical Assistance
Attn: CARE Coordinator
600 Washington Street
Boston, MA 02111

Once we receive your receipts and bills, we will send you a letter letting you know if you have reached your yearly cap.

Special Rules for Members Enrolled in a MassHealth MCO (Fallon, NHP, Network Health, and BMC HealthNet Plan)

If you are enrolled in one of the above MassHealth MCOs, you must follow the copayment rules of the MCO. The MCO pharmacy copayment rules are the same as for all other MassHealth members. There are currently no copayments for non-pharmacy services if you are enrolled with a MassHealth MCO.

Refer to the MCO's MassHealth copayment policy to find out how to submit copayment receipts. You should receive a letter from your MCO about their copayment policies by January 1, 2004.

Questions

If you have questions about this change, call the MassHealth Customer Service Center at the phone number listed below between 8:00 A.M. and 5:00 P.M., Monday through Friday.

MassHealth Customer Service Center
1-800-841-2900 (TTY: 1-800-497-4648 for people with partial or total hearing loss).

If you are enrolled with a MassHealth MCO and you have questions about the copayment policy, please contact the customer service center at your MCO.